

Child and Family Advisory Committee

Meeting Summary

November 21, 2006

Henrico CSB - Conference Room C

Glen Allen

I. Welcome/Introductions/Celebrations

Jean opened the meeting with a request to committee members to introduce themselves. Celebrations: this is Thanksgiving week, the parent meeting was productive. Jean wanted to celebrate Strong Roots for a Healthy Future. Great news, there is a second annual conference planned for July 27 and 28, 2007. Invitees to the conference include pediatricians, practitioners, other professionals, and family members. Scholarships will be available, registration fee \$25 and \$10 fee for on-site child care.

II. Jean asked for a motion to approve the minutes, Don moved acceptance, Catherine seconded motion with edits, include date.

III. Update Logo- committee proposed an activity for the children at CCCA and Virginia Treatment Center. The activity is intended to produce a logo for the OCFS. Final products will be brought back to the February meeting for a vote by the members.

IV. Update-OCFS

- Two Grant Opportunities- Demonstration Grants to Provide Community Based Alternatives ...- Center for Medicare/Medicaid services. VA is going after 2 demonstration grants—one is Money Follows the Person and the other is about community based alternatives to psychiatric residential treatment centers. Both of these grants are results of deficit reduction grants. Huge amounts of money available for both grants. .Money Follows the Person- Commitment is from General Assembly and governor—displays value of having people with disabilities in the community. Money Follows the Person- Julie Stanley (from governor's office of disabilities) is lead person. Great deal of attention paid to who participates in the decision making—good commitment to be all inclusive. Catherine Hancock reported on second grant proposal of demonstration project that allows children to receive care in community rather than residential institution. Five year grant and requires that states cannot request any additional money that they are all ready spending. States would use waiver that would put funds in the community rather than institutional care. Respite care, in home supports, environmental changes, were all included in the proposal. Could be a very good program and should hear by Friday (Nov. 25). So far, there has not been a waiver for mental health services for families, so this is very exciting. Grant begins December 1!

- **Resolution HJR 96-** dealing with autism. The resolve was- State Board of Depts of Education and Mental health to be sure that professionals were trained to work with people with autism. Provide additional training opportunities for training people about autism. The challenge for the stakeholder group is that there are already some really good advocates for autism awareness—including the Department of Education. The State Special Education Advisory committee already has a subcommittee on autism. It's important to collaborate with existing groups, rather than reinvent the wheel. Training opportunities will be available. Priority is early childhood, but all ages of children should be addressed. Draft purpose statement has been developed. Dec. 8 State Board of Dept. of Mental Health has requested a presentation for their meeting.

- **CSB Projects in Juvenile Detention Centers-** Six Projects have been added to Mental Health DJJ Projects- Collaborative projects with CSB and Juvenile detention centers. Added centers include: Alexandria CSB & There are 25 detention centers statewide. The hope is to have collaboration at each of them. Outcome data looked positive from initial projects. So far, there are 14 projects—the goal is 25 total.

- **Early Childhood-** There was an executive order from the Governor's office to establish a working group on early childhood initiatives. One of the initiatives of this working group is to combine all of the plans involving early childhood to be consolidated into one comprehensive strategic plan for early childhood. The overarching goal of this early childhood initiative is to ensure that children enter kindergarten school-ready.

- **System of Care/Evidence-Based Practice Demonstration Projects -** Two more systems of care project were awarded funding to support the implementation of system of care demonstration project sites, Alexandria and Cumberland Mountain for a total of four sites. Systems of care are consistent with children's committees and General Assembly recommendations to implement evidence based practices for children and adolescents in need of behavioral health services.

- **Mental Health Block Grant** –Additional ongoing funds from the Community Mental Health Services Block Grant became available due to efficient management of the community pharmacy. This enabled DMHMRSAS to provide block grant funding to CSBs that did not previously have any mental health block grant funds for services to children with serious emotional disturbance. Approximately 24% has been allocated to community services for children with serious emotional disturbance.

- **COSIG- Integrating Mental Health Substance Abuse Services** – carry-over unexpended funds were made available for CSB training and proposals were requested for the use of the funds. Six proposals were awarded funds for services for the child and adolescent population for CSB training; the OCFS was awarded funds to support increased CSB slots at the EBP training sessions.

- **Early Intervention-** the Part C system is collecting and analyzing data to prepare submission of its Annual Performance Report to the Office of Special Education Programs. The Part C system has been involved with the Virginia Department of Health Early Hearing Detection and Intervention Program and a project called Virginia Guide-By-Your-Side. This program is designed to provide support of families of children who are deaf, hard of hearing and deaf/blind to families at the time of their child's identification of hearing loss. A Family Guide will be designated to provide timely, unbiased, and complete information regarding communication options and available resources to families of children recently diagnosed as deaf or hard of hearing, emotional support, and timely referral to Part C Early Intervention services.

- **Child and Family Behavioral Health Policy and Planning Committee (330F)-** The Child and Family Behavioral Health Policy and Planning Committee submitted its report to the Chairs of the House Appropriations and Senate Finance Committee on June 30, 2006. The report builds on the 2005 report by outlining a ten-year plan for developing children's behavioral health services in Virginia organized around three goals with strategies. In addition, the committee made funding recommendations around increasing capacity and enhancing the size of the workforce and providing family support and education. For a complete report please visit the Department's web site.

V. State Agency Reports

OCS – Pam Fisher reported on planning system of care round tables statewide, a total of 8 across the state, OCS is utilizing TA staff to facilitate planning to promote system of care. Invitees will include providers, funders, and others interested in children's issues. OCS is seeking funding for specific events that will occur as a result of the planning sessions.

VI. Two Priorities for the Advisory Committee

The committee identified two priorities, the adoption of a logo for the OCFS, adding a family page to the OCFS web page and linking the family page to community resources.

VII. Agenda for the February meeting

Family story- Vickey Hardy-Murrell

Agency Presentation – Partnership for People with Disabilities

State agency reports

Feb or later, a presentation of system transformation grants, someone from OMRS, for example, Susan Neal, with an update about the transformation grant from CSB Money Follows the Person.

Discussion of Texas's legislation making Children a Priority

Recruiting DSS representative, make sure DOE is represented, DRS, families will recruit other families to participate on the committee.

What would the Committee like from OCFS?

- Making children a priority
- A home for developmental disabilities, a state office of developmental disabilities

Meeting adjourned.